

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

11669.770501

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			34					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	<i>3 1</i> /minus 20=		* / 6	1		X\$ 9=		OR	X\$18≃	7.52
IND	EPENDENT CL	AIMS	/3 minus 3 =		10			X40=		OR	X80=	800
MULTIPLE DEPENDENT CLAIM PRESENT								+135=			+270=	000
* If the difference in column 1 is less than zero, enter "0"						olumn 2		TOTAL		OR OR	TOTAL	1
CLAIMS AS AMENDED - PART II							IOIAL		UN	OTHER	1262 THAN	
(Column 1) (Column 2)						(Column 3)	<u> </u>	SMALL E	ENTITY	OR	SMALL	
AMENDMENT A	Tradition of the second	CLAIMS REMAINING AFTER AMENDMENT	A. 1.	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 34	Minus	: ئ **	34	= X		X\$ 9=		OR	X\$18=	
	Independent	* /3 NTATION OF MI	Minus	***	13 FOLAIM	=/0		X40=		OR	X80=	
	FIRST PRESE	NIATION OF MI	ULTIPLE DEP	ENDEN	CLAIM		J	+135=		OR	+270=	
							l	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)		ADDI1.1 CC		•	ADDIT: 1 EE1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT			IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM			+135=		OR	+270=	
		•						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)		,				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	1 (1) 1 (1)	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 33	Minus	** 3	4	= 3	Į I	X\$ 9=		OR	X\$18=	ï
	Independent	* /3 NTATION OF M	Minus	*** /	T CLAIM	-0	41	X40=		OR	X80=	
_	FIRST PRESE	INTATION OF M	OLTIPLE DEP	ENDEN	CLAIIVI		┛┃	+135=		OR	+270=	
**	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 									OR	TOTAL ADDIT: FEE	
***	If the "Highest Nu The "Highest Nun	mber Previously P nber Previously Pa	aid For" IN THIS id For" (Total or	S SPACE Independ	is less tha dent) is the	an 3, enter "3." e highest numb		ADDIT. FEE	propriate box	_		